STATEMENT OF ORGANIZATION OFFICE USE ONLY	
1. Name and Address of Committee 2. Date of this	Statement
ELECT JULEON I. GLANNOSSO 1-30	0-19
P.O. Box 24060 3. Estimated	Membership
NEW ONLEARS, LA	
Check If: New Committee 4. Amended S Yes	
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)	
a. Name b. Position c. Address	
DANIEL FOLEY Chairperson P.O. Box	24060, NOLK, 70184
Aman A Rizzo Treasurer P.O. Box	24060, NOLH, 70184
Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly establish	ned, administers, or financially supports this committee.)
a. <u>Name</u> b. <u>Address</u>	c. Relationship to Committee
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)	
a. Name b. Address	
IBENIA BANK 601 PORONAS ST., SUITE 100, NOLA, 70130	
GULF WAST BANK! TRUST 201 N. (MARGLETON, AUE., NOCA, FOILE	
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee	
b. Name of Candidate	c. Office Sought by the Candidate
JOSEPH I. GIANNUSSO II	COUNCIL, DISTRICT A
9. a. Name of Person Preparing Report JOSEPH I. GIARRUSSO TIL	
b. Daytime Telephone 504-810-220	
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.	
This 30 Th 2019.	
Sugnature of Committee Chairperson	586 - 9395 Daytime Telephone Number
Signature of Committee Treasurer, if any	495-1230 Daytime Telephone Number